PTO/58/06 (08-03)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a yalid OMB control number. 85018 1997 PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) FEE RATE FEE NUMBER EXTRA RATE NUMBER FILED RASIC FEE OR (37 CFR 1.16(a)) OR YOTAL CLAIMS X S minus 20 = (37 CFR 1.16(c)) X S INDEPENDENT CLAIMS OR minus 3 = (37 CFR 1.16(b)) OR • • (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR TOTAL TOTAL If the difference in column 1 is less than zero, enter "O" in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 2) (Column 1) HIGHEST RATE CLAIMS ADDI-RATE PRESENT NUMBER TIONAL REMAINING TIONAL **EXTRA** PREVIOUSLY FEE AFTER FEE ENT AMENDMENT PAID FOR Micus x s OR Total 33 X S ENDM OF CER LINGS Minus X S OR lo Independent (37 CFR 1.1803) X S OR + 4 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (07 CFR 1.18(4)) TOTAL TOTAL OR ADO'L FEE ADO'L FEE 8-18-06 (Column 2) (Column 3) (Column 1) ADDI-HIGHEST RATE CLAIMS RATE ADDI: PRESENT NUMBER TIONAL REMAINING TIONAL EXTRA PREVIOUSLY FEE AFTER AMENDMENT FEE PAID FOR Minus OR Total 07 CFR L1849 X S ENDW Minus OR X S independent of cfR LIED x s OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) TOTAL TOTAL ADD'L FEE OR ADDILFEE (Column 2) (Colorina 3) (Column 1) HIGHEST CLAIMS .RATE ADOI-TIONAL RATE PRÉSENT TIONAL NUMBER REMAINING **EXTRA** FEE PREVIOUSLY AFTER FEE 四 PAID FOR AMENOMENT Minus OR X 3, Total arteri Luca AMENDM Minus OR X S Independent G7 CFR 1.1803 OR FIRST PRESENTATION OF MULTIPLE DEPENCENT CLARY (37 CFR 1 16(4)) TOTAL TOTE ADD'L FEE **OR** ADD : FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the entry in column 1 is less than the entry in column 2, write 10 in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "2".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35-U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. USE TO 80 process) an apparation. Considentiality is governed by 35-U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application r Docket Number

19850181

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			.33		!		I	RATE	FEE		RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			33 _ minus 20=		. 13			X\$ 9=		OR	X\$18=	234.
INDEPENDENT CLAIMS			6 _ minus 3 =		3			X40=		OR	X80=	240.0
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	, zęrom	
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	1.184	
CLAIMS AS AMENDED - PART II 12-12-03 (Column 1) (Column 2) (Column 3)								SMALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 72	Minus	0	7.7	= <i>O</i>	1 L	X\$ 9=		OR	X\$18=	0
	Independent	NTATION OF M	Minus	***	GAINA	<u> - // </u>		X40=		OR	X80=	0
_	TIMOTTTIESE	NIAHOH OF W	OLIII EE OLI	CHUCH	CLAIM			+135=	. /	OR	+270=	0
							L	TOTAL DDIT, FEE	/	OR	TOTAL ADDIT, FEE	0
<u>5-</u>	13-04	(Column 1)		(Colu		(Column 3)			,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 32	Minus	٠. ق	33	= .		X\$ 9=		OR	X\$18=	
	Independent	• 5	Minus	••• (0	=] [X40=		OR	X80=	
L_	HHST PHESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		┛┞	+135=		OR	+270=	
			*			_ · <	L	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
12	-1-04	(Column 1)	2.72	(Colu	mn 2)	(Column 3)					ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	T tal	. 18	Minus	• 3	3	=	IJſ	X\$ 9=		OR	X\$18=	
	Independent	1. 4	Minus	•••	6	=	1 t	X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		┚┝	.105				
	if the entry in colu	mn 1 is less than t	he entry in colu	ırın 2, w <i>r</i> ite	, 9°0° In coi	lumn 3.	Ĺ	+135=		OR	+270=	,
**	if the "Highest Nu "If the "Highest Nu	mber Previously Particusty P	aid For IN THI	S SPACE I	s less that is less tha	n 20, enter "20. In 3, enter "3."	_	DDIT. FEE		OR	TOTAL ADDIT. FEE	
	The "Highest Nurs	nber Previously Pa	id For" (Total or	r Independ	ent) is the	highest number	er four	acas enti ni br	ropriate box	in col	lumn 1.	į.